L			HECKING D	EE DETER! lecember 8,	2004	ation re	COF	RD'	6	9/	, 7 S.	1,22	,	
		CLATE		LED - PART				SMA	LEN	#_		7. 5.6	, /	
Γ	TOTAL CLA	MS .		olumn 1)	T (C	okima 2)	_	TYPE		<b>5</b>	0	OTI R SMA	HER THA	
Ī	FOR		M	NUMBER FILED		NUMBER EXTRA		·RA	_	FEE	]	RAT		
•	TOTAL CHAR	GEABLE CLAI		minus 20=		• NATE NORTH		BASK	FEE		_ 0	BASIC	FEE	
U	VDEPENCEN	CLAIMS		minus 3 =				'X\$ 2			ОЯ ОЯ	X\$50	has .	
N	SULTIPLE DE	PENDENT CLA	IM PRESE					X10				X200		
,	If the differe	ca in column	1 in laws et	IBN Zero, enter			J ·	+180	)=		OF	+360-		
	781					column 2		TOT	u		OR	TOTAL	-	
•	2-6	(Column	3 AMEN 1)	DED - PAR1 (Cotum		(Cabuma a					•	OTHE	R THAN	
₹		CLAIMS REMAININ		HIGHE	ST	(Column 3	۱ 🕇	SMAI	LEN	DDI-	OR 1	SMAL	L ENTIT	
		AFTER AMENDME	NT	PREVIOL PAID F	JSLY	PRESENT EXTRA		RATE	TX	DNAL		RATE	TION	
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	THOTPAC	NO NOTATION OF	MULTIPLE	DEPENDENT C	MIAJ		] <sup>*</sup>		+-		03	X200=	<b>↓</b>	
	10 3						L	+180= 1014		4	OR	+360=		
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ŀ	Total Independent	. 20	Minus	- 20		• /	,	<b>US</b> 25=	1		OR	X\$50=	FEE.	
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٥	123/0	(Column 1)		. (Column 2		Column 3)	ADO	OIT. FEE	<u> </u>	0إنــ	AC	OT. FEE		
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